

Specialized Sexual Assault Services

RENEWAL APPLICATION

For continued funding July 1, 2016 - June 30, 2017

Due April 25, 2016



Administered by the Office of Crime Victims Advocacy

Department of Commerce

1011 Plum Street SE

PO Box 42525

Olympia, Washington 98504-2525

(866) 857-9889



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Application Due: April 25, 2016

NO APPLICATIONS WILL BE ACCEPTED AFTER April 25, 2016 WITHOUT
PRIOR WRITTEN APPROVAL FROM THE OCVA
SEXUAL ASSAULT SERVICES PROGRAM MANAGER.

This application and all of the applicable forms are available in PDF, Word and/or Excel
format on the OCVA web page at: www.ocva.wa.gov.

Send one unbound original and one copy of your completed application to:

Express Delivery Address:

Office of Crime Victims Advocacy
Attn: Stephanie Condon
1011 Plum St. SE
Olympia, WA 98501-1530

or

Regular US Postal Service:

Office of Crime Victims Advocacy
Attn: Stephanie Condon
P.O. Box 42525
Olympia, WA 98504-2525

Please allow normal mail delivery time to ensure timely receipt of the application.

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| Attachment C: | Service Assessment and SFY 2017 Project Narrative |
| Attachment D: | Proposed Services Form |
| Attachment E: | Support Group Outline |
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Introduction

In April 2015, Specialized Sexual Assault Services applicants submitted two-year proposals in response to the July 1, 2015 - June 30, 2017 (2015 - 2017) Specialized Sexual Assault Services funding application. Through this application, OCVA determined Specialized Sexual Assault Services awards for State Fiscal Year (SFY) 2016 and SFY 2017. Grants for the first year were awarded for the period July 1, 2015 - June 30, 2016.

This renewal application for SFY 2017 is required for all grantees that received an award through the 2015 - 2017 competitive application process and will be used to write the second year grants for July 1, 2016 - June 30, 2017. Only agencies and organizations that received an award through the 2015 - 2017 competitive application should respond to this application.

For this application, the Office of Crime Victims Advocacy (OCVA) requires the following information from current Specialized Sexual Assault Services grantees (see Attachments for forms):

- 1) Applicant Information Form
- 2) Subcontractor Information Form(s), if applicable
- 3) Service Assessment Form and SFY 2017 Project Narrative
- 4) Proposed Services Form (determined by your region's community planning process in the spring of 2015)
- 5) Support Group Detailed Outline(s), if applicable
- 6) SFY 2017 Budget Detail Worksheets
- 7) Training Forms for new staff and/or subcontractors; ongoing training hours reported in InfoNet for existing staff

Funding

OCVA anticipates SFY 2017 funding levels for Specialized Sexual Assault Services will remain at the current level, with the potential for a 3% increase. This estimate is tentative; as the exact funding levels will not be known until the state budget is passed and finalized.

Specialized Services funds are allocated through a funding formula that determines the amount available to each of the 35 regions throughout the state. The funding formula includes a population component. Changes in county population may result in slight

increases or decreases in a region's allocation of Specialized Services funding. For regions where there is more than one applicant, all applicants must ensure that their combined budgets total the region's allocation of Specialized Services funding.

Programs may plan based on an allocation that is the same as their region's current allocation of Specialized Services funds, with potential additions of up to 3% noted on the Budget Adds form. Please contact an OCVA Sexual Assault Services Program Coordinator for these numbers, if needed.

Both a Budget Adds and a Budget Cuts form have been included in the budget worksheets (Attachment F) to take into account final funding levels and potential fluctuations in regional funding allocations. Please make sure to complete these forms, as we will use this information to modify your grant budget, if needed, once final budget figures are known.

Americans with Disabilities Act (ADA)

The Department of Commerce complies with the Americans with Disabilities Act (ADA). Applicants may contact the Application Coordinator to receive this application in Braille or on tape.

Eligibility

Eligible Applicants

Eligible applicants include local governmental agencies, non-profit organizations, Tribes and tribal organizations who meet the qualifications to provide sexual assault victim services, and who received an award through the 2015 - 2017 competitive application process.

Eligible Services

Services and the allocation of funding among the region's service providers must reflect the decisions your region made in its two-year community planning process conducted as part of the 2015 - 2017 competitive process. If a region wishes to change the configuration of services and/or the proportion of funding among current Specialized Services grantees, it must demonstrate the proposed change is the result of ongoing, community planning and assessment or conduct another community planning process.

Regional Example

In SFY 2016, two agencies received Specialized Sexual Assault Services funding.

Agency A received 40% of the region's funding to provide therapy.

Agency B received 60% of the region's funding to enhance core services.

The SFY 2017 funding allocation should reflect the same proportion of funding to each agency for a similar configuration of services.

The following services are eligible with this funding:

Specialized Sexual Assault Services

- Therapy
- Support Groups
- Medical Social Work

Funds awarded through this application may support Therapy, Support Groups, and Medical Social Work services to victims of sexual abuse/assault throughout the State of Washington. These eligible services are defined as Specialized Sexual Assault Services and are intended to enhance the treatment and healing of sexual assault survivors and their families.

Definitions and descriptions of all the eligible services are outlined in the Sexual Assault Service Standards; Appendix A. Proposed services must be delivered according to these service standards.

It is expected that, when appropriate, all interventions used will be victim-centered and accepted as evidence-based or promising practices.

Specialized Services Funds to Enhance Core Services

- Information, Referral, and Awareness
- Crisis Intervention
- General, Legal, and/or Medical Advocacy
- System Coordination
- Primary Prevention

Specialized Services funds may also support the delivery of Core Sexual Assault Services. Definitions of Core Sexual Assault Services are outlined in the Core Sexual Assault Service Standards, Appendix A. Any proposal to enhance Core Services with Specialized Services funding must be based on decisions your region makes in the community planning process. Only agencies that are an accredited Community Sexual Assault Program (CSAP) are eligible for funding to provide Core Sexual Assault Services. (Core Prevention Services may be provided through a subcontract with non-CSAP agencies).

Specialized Services Funds to Provide or Enhance Sexual Assault Services in Marginalized and Native American Communities

- Community Organizing, Training and Education
- Community Responding
- Primary Prevention

Specialized Services funds are available for culturally and linguistically appropriate advocacy services and prevention activities. Definitions of these services and qualifications for eligible providers are outlined in the Community Organizing, Training and Education; Community Responding; and Primary Prevention Service Standards, Appendix A.

Any proposal to provide or enhance culturally and linguistically appropriate advocacy services or prevention activities with Specialized Services funding must be based on decisions your region makes in the community planning process. Only agencies that meet the qualifications listed in the service standards are eligible for funding to provide Community Organizing, Training and Education; Community Responding; and Primary Prevention services.

Special Terms and Conditions

This grant is comprised of both state and federal funds, including federal Victims of Crime Act (VOCA) funds.

VOCA Volunteer Requirement

Each successful grantee must utilize at least one volunteer directly supporting your direct service and/or service outreach activities in order to fulfill federal funding requirements. Please contact OCVA staff if you anticipate difficulty in meeting the volunteer requirement; we will assist you in identifying potential volunteer activities that may fulfill this requirement or in requesting a waiver.

VOCA Match Requirement

Each successful grantee is responsible to provide a 20% (5% for Tribes) match for the VOCA portion of grant funds they receive. Each grant will include State funds that may be used to satisfy the match requirement. Each successful grantee agrees that the 20% (5% for Tribes) match required for the VOCA portion of grant funds will be met by the Washington State funded portion of the grant funds. If the Washington State portion of the grant is not sufficient to meet the VOCA match requirement, the agency agrees that local funds or in-kind will complete the match, or a waiver may be requested.

Copy of Internal Revenue Service 501(c)(3) Determination Letter

VOCA funding requires that nonprofit organizations verify their nonprofit status by providing a copy of their Internal Revenue Service (IRS) 501(c)(3) determination letter.

Nonprofit organizations that have not previously submitted a copy of their IRS 501(c)(3) determination letter to OCVA, please submit a copy with the application for funding.

A nonprofit organization is as described in section 501(c)(3) of the Internal Revenue Code of 1986 and is exempt from taxation under section 501(a) of that Code. See 42 U.S.C § 13925(b)(16)(B).

Computer Networks

Federal VOCA funding cannot be used to maintain or establish a computer network, unless such networks block the viewing, downloading, and exchanging of pornography.

In order to be in compliance with this special condition, grantees have three options:

1. Maintain or establish a network that blocks the viewing, downloading, and exchanging of pornography.
2. Maintain or establish your network without a block and request that OCVA use the state funded portion of your grant to cover the costs related to establishing or supporting a computer network.

If you decide to use this option, **please make sure to note this on your Goods and Services budget worksheet**, and you will be asked to identify all costs associated with establishing and supporting your computer network.

3. Do not use OCVA Sexual Assault Services grant funds to maintain or establish a computer network.

Your Program Coordinator at OCVA is available to answer any questions you may have regarding this requirement.

VOCA Final Program Guidelines

The complete guidelines are available at <http://www.ojp.usdoj.gov/ovc/voca/vaguide.htm>

New This Year

Position Descriptions for VOCA-Funded Staff and Volunteer(s)

The federal Office for Victims of Crime now requires that VOCA subrecipients (grantees) provide position descriptions for staff being paid with VOCA funds and position descriptions for volunteers whose time is being used as match or to meet the volunteer requirement. This documentation is needed for each grant that includes VOCA funds. Please submit staff and volunteer position descriptions with the application for funding. If more than one grant-funded staff has the same job position, only one position description is needed.

Options for Recovering Indirect or Administrative Costs

Per [Uniform Guidance](#) for federal awards, OCVA provides three options for recovering Indirect or Administrative costs.

Administrative: Direct Charging Method

Grantees may directly charge up to 15% of their grant total for administrative costs. This could include both administrative costs and/or facilities costs to run your overall organization.

OR

Indirect: Indirect Charging Method

1) Federally Negotiated Indirect Cost Rate (NICR)

If an organization has a NICR, and they wish to recover indirect costs, this is the rate that must be used (cannot use the 10% MTDC method).

OR

2) 10% of the Modified Total Direct Costs (MTDC)

Applicants must obtain certification of the calculation by a CPA (if a nonprofit or a Tribe), or county auditor/treasurer (if a government entity).

Grantees may only choose one method. Please see the [Budget Line Item and Guidance](#) section for additional information.

Billing

Grantees may request reimbursement for services either monthly or quarterly.

Billing for Therapy Services

Grantees that elect to provide Therapy Services with Specialized Services funds must bill Crime Victims Compensation and/or private insurance resources first when these resources are available and applicable. OCVA may be billed for un-reimbursed therapy costs for Therapy Services that are not billable to private insurance or Crime Victims Compensation. For example:

- Insurance company denies coverage for therapy services because the request does not align with the plan's criteria
- Costs associated with accessing treatment are not covered such as travel and co-pays
- It is not safe for the survivor to utilize their partner or parent's insurance coverage
- The therapist(s) trained in sexual assault treatment does not accept the survivor's insurance plan

Data Collection and Reporting Requirements

Grantees must submit quarterly data reports through InfoNet. For the Year Two grant, InfoNet data will be due no later than October 15, 2016, January 15, 2017, April 15, 2017 and with final invoice (per grant provisions).

OCVA program staff conducts periodic checks for compliance with these requirements during the grant period of performance. Noncompliance may result in suspension of payments to the grantee under this grant.

No Obligation to Grant

This application does not obligate the state of Washington, Department of Commerce or OCVA to grant for services specified herein. Applications submitted become the property of the Department of Commerce and cannot be returned. The Department of Commerce is not liable for any costs incurred by the Grantee in developing the application.

Submission of Proposals and Due Date

One clearly marked original proposal and one (1) unbound copy, whether mailed or hand delivered, must be received by OCVA **by 5:00 p.m. local time in Olympia, Washington on April 25, 2016**. The proposal and copies are to be sent to the Application Coordinator, Stephanie Condon, at the address shown below. The envelope should be clearly marked to the attention of the Application Coordinator.

Please allow normal mail delivery time to ensure timely receipt of applications by the Application Coordinator. No applications will be accepted after April 25, 2016 without prior written approval from the OCVA Sexual Assault Services Program Manager.

Express Delivery Address:

Office of Crime Victims Advocacy
Department of Commerce
Attn: Stephanie Condon
1011 Plum St. SE
Olympia, WA 98501-1530

Regular US Postal Service:

Office of Crime Victims Advocacy
Department of Commerce
Attn: Stephanie Condon
P.O. Box 42525
Olympia, WA 98504-2525

No electronic (fax or e-mailed) applications will be accepted. All of the completed application materials must be received at the above address by **April 25, 2016**, no later than **5:00 pm**.

Any questions related to the application should be directed to OCVA sexual assault services program staff at 1-866-857-9889.

Revisions to the Application

In the event it becomes necessary to revise any part of this application, addenda will be provided via e-mail or in hardcopy to all who were sent the application.

If you download this application from the Department of Commerce, Office of Crime Victims Advocacy website located at www.ocva.wa.gov, you are responsible for sending your name, address, e-mail address, and telephone number to the Application Coordinator in order for your organization to receive any application amendments or applicant questions and OCVA answers.

OCVA also reserves the right to cancel or to reissue the application in whole or in part, prior to execution of a grant.

Definition of Terms

For the purpose of this application, the following words/phrases are defined to clarify the Department's use of said terms.

Accreditation: A process to determine if an agency meets the Department's standards for the delivery of Core Sexual Assault Services.

Community Organizing, Training, and Education (COTE): Culturally and linguistically appropriate information and activities to increase knowledge about sexual violence and its root causes, and promote access to services for victims and survivors in marginalized and Native American communities. See Appendix A for detailed description.

Community Responding (CR): Culturally and linguistically appropriate personal support and/or assistance in accessing services and addressing sexual abuse/assault related issues for victims in marginalized and Native American communities. Activities may include accompanying a victim to the hospital, attending court hearings with a victim, and helping a victim finding resources to relocate after an assault. See Appendix A for detailed description.

Community Sexual Assault Program (CSAP): An agency or program that has been accredited as a provider of core sexual assault services in the state of Washington and

is thus entitled to non-competitive funding for core services in the region in which that agency/program operates.

Core Services: Information, Referral and Awareness, Crisis Intervention, Legal Advocacy, Medical Advocacy, General Advocacy, Systems Coordination, and Primary Prevention. See Appendix A for detailed description.

Evidence-Based Practice: For the purposes of this application, evidence-based practice is defined as a treatment, intervention protocol, or practice that has some scientific, empirical research evidence for its efficacy with its intended target problems or populations.

Marginalized: Refers to persons in communities that may include, but are not limited to, members of the lesbian, gay, bisexual, transgender, queer community; individuals with disabilities (physical, mental, developmental or other); ethnic and racial minorities; and Native American communities.

Office of Crime Victims Advocacy (OCVA): Provides advice to local and state government on practices and policies that impact crime victims and provides funding, training, and consultation to help communities develop programs to serve crime victims; provides advocacy for victims who encounter difficulty accessing services or who believe their statutory or constitutional rights have been denied. OCVA is part of Washington State's Department of Commerce.

Outreach: Relates to the Core Service Standard Information, Referral and Awareness in which a CSAP provides information verbally or in writing on sexual abuse/assault and/or available services. See Appendix A for detailed description.

Primary Prevention: Culturally and linguistically appropriate activities to promote attitudes, behaviors, and social conditions that are aimed at preventing sexual violence before it happens in marginalized and Native American communities. See Appendix A for detailed description.

Region: The geographical area (one or more counties) designated by OCVA as a unit for the purposes of funding allocation.

Secondary Victim: A person who is either a family member or someone who is closely associated with the victim, and is impacted by the assault/abuse, but is not the perpetrator of the sexual abuse/assault.

Specialized Services: Therapy, Support Groups, and Medical Social Work. See Appendix A for detailed descriptions.

Tribal Organization: An organization that is administered by Native Americans and whose primary mission is to serve Native Americans.

Underserved: Underserved refers to individuals, populations or communities for whom no treatment services exist; or there are gaps in existing services; or access to services are inhibited by barriers such as, but not limited to, race, ethnicity, culture, age, sexual orientation, financial status, geographic isolation, or physical constraints.

Victim/Primary Victim: The person who has been subjected to a sex offense or an attempted sex offense, as defined by the Victim of Crime Act (VOCA) and/or WA RCW Chapter 9A.68A, 9A.44, 9A.64, and 9A.88. The terms sexual abuse and sexual assault are used interchangeably in this application and refer to the broad continuum of sex offenses described in WA RCW Chapter 9A.68A, 9A.44, 9A.64, and 9A.88.

Victim-Centered: The provision of culturally appropriate and immediately available services based on the unique needs and circumstances of victims and survivors. Services are specific, client-focused and driven by the individuals impacted by sexual abuse/assault.

Washington Coalition of Sexual Assault Programs (WCSAP): A nonprofit organization and statewide coalition whose mission is to unite agencies engaged in the elimination of sexual violence through education, advocacy, victim services and social change.

Budget Line Items and Guidance

The budget is divided into five line items. Below are definitions for the different line items on the Budget Detail Worksheets (Attachment F). Under each section, provide a breakdown within the line item that specifies the individual cost per item. For example, within "Salaries" list the names of staff members assigned to this project, their position title, the percentage of their salary that this grant will fund, and the total amount you are requesting for their salary. Within "Subcontracted Services and Consultant Fees" list all subcontractors that will receive Specialized Services funding and the total amount you are requesting for each subcontractor.

Notes:

- Supervision and consultation services for Support Group Facilitators and Therapists may be billed to the grant. Costs associated with these activities may be subcontracted to an individual or an agency or may be reimbursed under Salaries for staff within the organization if they meet the qualifications criteria.
- Grantees that elect to provide Therapy Services with Specialized Services dollars must bill Crime Victims Compensation and/or private insurance resources first when these resources are available and applicable. OCVA can be billed for unreimbursed therapy costs, or for Therapy Services, which are not billable to private insurance or Crime Victims Compensation.
- Equipment (items over \$5,000) is **not** an allowable expense under this funding

Salaries

The cost of paying staff salaries to:

- provide direct services to clients,
- supervise employees who are providing direct services, and
- provide programmatic support services, such as a bookkeeper or receptionist (this can also go into Indirect, see the Indirect section below).

List each position to be paid with these grant funds by name of employee and title, if available. Show the annual salary rate and full-time equivalent (FTE) of position to be funded with this grant.

Calculating FTE

Calculation is based on 40 hours/week x 52 weeks/year ($40 \times 52 = 2080$ hours).

1.0 FTE - Calculation: $2080/2080$ (40 hrs./week x 52 weeks = 2080 hours)

.50 FTE - Calculation: $1040/2080$ (20 hrs./week x 52 weeks = 1040 hours)

.25 FTE - Calculation: $520/2080$ (10 hrs./week x 52 weeks = 520 hours)

If your agency's full-time work week equals 35 hours instead of 40, the FTE for a person working full time equals .87 FTE, not 1.0 FTE.

Please contact OCVA if you need further help determining staff FTE.

Benefits

The cost of paying payroll taxes, insurance, and other fringe benefits of staff listed in the Salaries line.

Costs must only be for the personnel named in the Salary line. Benefits should be based on actual known costs or an established formula. Benefits calculations should be consistent on all OCVA grants and should be allocated appropriately.

Subcontracted Services and Consultant Fees

The cost to pay individuals and/or agencies to provide subcontracted services. Subcontract costs must be explained in the budget.

Consultants/Trainers/Therapists compensation cannot exceed \$650 per day (excluding travel and per diem) for an eight-hour day or cannot exceed \$81.25 per hour for less than an eight hour day. The grantee agrees that if the rate exceeds \$650 per day or \$81.25 per hour the Washington State funded portion of the grant will cover the cost of the subcontracted service.

Please include a detailed description of the services that will be performed by subcontractors, such as therapists, trainers, and speakers. Indicate why you propose to subcontract for the service.

Goods and Services

The cost of providing services and activities. Examples of Goods and Services include supplies, utilities, rent, professional liability insurance, travel, and telephone. Emergency financial assistance for costs related to immediate health and safety is also allowable (such as emergency food, clothing, transportation, and shelter).

“Direct” Goods and Services costs are those that are specific to the OCVA sexual assault services grant.

Travel

If staff travels to provide services or activities as part of the sexual assault services grant, the total cost of travel can be budgeted to the OCVA sexual assault services grant.

Travel expenses incurred or paid by the grantee shall be reimbursed at a rate not to exceed the current state rate and in accordance with the State of Washington Office of Financial Management Travel Regulations. Current rates for travel may be accessed at <http://www.ofm.wa.gov/resources/travel/colormap.pdf>.

“Shared” Goods and Services costs are those that benefit more than one program. One way of budgeting shared Goods and Services costs is by using the percentage of FTEs (Full-Time Equivalencies) method.

Goods and Services Example ~ Shared Cost

One way to calculate shared Goods and Services costs is to use the percentage of staff FTEs.

The organization has two staff people, Mary and Anita, who are full time employees (1.0 FTE each) who will both spend 50% of their time providing services for your OCVA sexual assault services grant.

$$2.0 \text{ FTE (2 staff at 1.0 FTE)} \times 0.50 \text{ FTE} = 1.0 \text{ FTE for SA Services}$$

The agency has three other employees (who do not provide sexual assault services). Their combined FTE equals 3.0.

$$\text{Mary and Anita SA FTE} = 1.0 \text{ FTE}$$

$$\text{Agency Total FTE} = 5.0 \text{ FTE}$$

The total agency FTE is 5.0 because you have 5 staff members that are each 1.0 FTE.

Expenses that are “shared,” such as rent and utilities, would be split based on the percentage of FTE for sexual assault services compared to the agency total FTE.

$$1.0 \text{ FTE (for Mary and Anita)} / 5.0 \text{ FTE (total agency FTE)} = 0.20 \text{ or } 20\%$$

Therefore, if the rent is \$650 a month, multiply it by twelve (12) months (which is the length of the fiscal year) and then multiply it by 20%. Calculate the telephone, utilities, and other “shared” costs the same way.

Options For Recovering Administrative OR Indirect Costs

Administrative: Direct Charging Method

Grantees may directly charge up to 15% of their grant total for administrative costs. This could include both administrative costs and/or facilities costs to run your overall organization. These costs must be connected and supportive to the grant program, include a cost allocation rationale, and be approved by OCVA. Examples of this type of cost include: a portion of the salaries and benefits for the administrative functions of an executive director, accountant, or a computer specialist, and the associated costs for these functions such as supplies, general building and office equipment and maintenance.

This does not have to include the costs for program specific functions that you directly allocate to the Salaries, Benefits, and/or Goods and Services. For example, the rent and utilities for the space where support groups are conducted can be allocated and billed to Goods and Services. Or, if a portion of a manager's time is spent providing or supervising direct advocacy services, that portion of time can still be allocated and billed to Salaries and Benefits.

Please Note: If a cost is allocated to a grant as a direct cost, it cannot also be recovered as an indirect cost (the method chosen needs to be consistent).

Indirect: Indirect Charging Method

If an organization prefers to use an indirect charging method, there are two options available.

1) Federally Negotiated Indirect Cost Rate (NICR)

If an organization has a NICR, and they wish to recover indirect costs, this is the rate that must be used (cannot use the 10% MTDC method).

Applicants must attach a copy of the approval from the cognizant federal agency of the federal Negotiated Indirect Cost Rate with their application.

2) 10% of the Modified Total Direct Costs (MTDC)

Applicants must obtain certification of the calculation by a CPA (if a nonprofit or a Tribe), or county auditor/treasurer (if a government entity). Documentation must be submitted to and approved by OCVA, see the certification form, Attachment G.

Modified Total Direct Cost¹ is defined as: *All direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and sub-awards and subcontracts up to the first \$25,000 of each sub-award or subcontract (regardless of the period of performance of the sub-awards and subcontracts under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each sub-award and subcontract in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.*

Audit Costs: A pro-rated share of reasonable audit costs may be charged so long as the audit cost is identified in the grant budget that grantees submit to the Department of Commerce.²

¹ Federal Management and Budget Office (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, December 26, 2014 <https://federalregister.gov/a/2013-30465>

² For agencies not subject to A-133 audit requirements, OCVA will ensure audit costs are covered with state funds

Budget Justification

You must include descriptions of costs for each line item in your budget. You can provide this information on the budget detail worksheets or you may attach additional pages.

For example:

Goods and Services – Rent - \$5,000

Cost of rent for providing sexual assault services based on your agency's cost allocation plan. The budget justification should include a description of how the percentage of costs was calculated.

Goods and Services – Printing - \$1,000

Cost to print new Therapy Services outreach brochures and psycho-educational Support Group curricula materials.

Goods and Services – Training - \$1,400

Cost to send staff members working under this grant to approximately two in-state trainings annually. This includes registration, travel, lodging and meals.

If your region has elected to enhance Core Services, or to enhance or provide Community Organizing, Training and Education; Community Responding; and/or Primary Prevention services with Specialized Sexual Assault Services funding, you must indicate the total amount of Specialized Sexual Assault Services funding that will enhance these services on the Summary budget form. You must also provide an explanation in your budget justification of what those funds will support.

Please see Attachment F for Budget Detail Worksheets.

Training Requirements and Qualifications

Applicants must submit training documentation for therapists, support group facilitators, medical social work providers, advocates and prevention educators. Please review the explanations below for more information about the training requirements, and please refer to the Sexual Assault Service Standards (Appendix A) for details on the qualification requirements for each type of service provider.

Please remember that OCVA tracks ongoing training hours for providers on a fiscal year (July – June) cycle. These training hours must be reported in InfoNet.

OCVA values in-person trainings and being able to network. Due to budget limitations, we understand that agencies may have to limit the amount of in-person trainings staff/subcontractors attend. Agencies are encouraged to support staff/subcontractors to receive all or a portion of their required ongoing training in-person, but OCVA will approve meeting required ongoing training through webinars and/or online distance learning. Please continue to obtain WCSAP approval as needed.

Therapy

Please note: Therapists providing services with this funding are required to have a Master's degree. Thus, coursework in a Master-level program will not substitute for initial or ongoing training requirements.

APPROVED PROVIDERS

OCVA approved therapists who have been providing Specialized Sexual Assault Therapy Services must document that they received 6 hours of ongoing, sexual assault specific training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet. Approved topics and documentation requirements are listed in Attachment J.

NEW PROVIDERS

Therapists who have not been approved by OCVA are required complete the 23 - hour Therapist Core Sexual Assault training from WCSAP within the first six (6) months of providing therapy services on this grant.

Please contact your program coordinator if you are unable to attend a WCSAP Therapist Core Training Event, or would like to discuss other options for meeting this requirement (see Attachment I).

Support Groups

APPROVED PROVIDERS

OCVA approved facilitators and who have been providing Specialized Sexual Assault Support Group Services must document that they received 12 hours of ongoing, sexual assault specific training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet.

All ongoing training must be WCSAP approved.

NEW PROVIDERS

Facilitators who have not been approved by OCVA must attach the OCVA Core Sexual Assault Training Summary for Support Group Facilitators (Attachment H) indicating they have completed the 30-hour Sexual Assault Advocate Core training, have training on group process and interpersonal dynamics, and have experience as a group facilitator and/or co-facilitator.

Please contact your program coordinator to develop a training plan, if needed.

Medical Social Work

APPROVED PROVIDERS

OCVA approved providers who have been providing Medical Social Work services must document that they received 12 hours of ongoing, sexual assault related training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet.

NEW PROVIDERS

Providers who have not been approved by OCVA must attach a resume and documentation of 12 hours of initial training relevant to sexual assault.

Culturally and Linguistically Appropriate Services and Activities³

APPROVED PROVIDERS

OCVA approved providers who have been providing culturally and linguistically appropriate services and activities must document that they have received 12 hours of WCSAP approved ongoing sexual assault training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet.

All ongoing training must be WCSAP approved.

NEW PROVIDERS

Providers who have not been approved by OCVA must submit documentation of 15 hours of OCVA approved initial sexual assault training and 15 hours of OCVA approved culturally and/or linguistically appropriate initial sexual assault training. See Attachment K.

Staff conducting primary prevention activities and their supervisors must complete the 5-hour web-based WCSAP prevention orientation. The prevention orientation online course can be accessed at the WCSAP website (www.wcsap.org) or at <http://www.wcsap.org/prevention-orientation-online-course>.

³Services must be provided by community-based non-profit organizations, with a primary mission and history of serving a marginalized community, Tribes or tribal organizations. These services are reflected in the Community Organizing, Training and Education; Community Responding and Primary Prevention Service Standards (see Appendix A).

NEW: Enhanced Core Services Primary Prevention Activities

Primary Prevention is an optional core service; therefore it is no longer reviewed as a component of the CSAP accreditation process. OCVA will be verifying initial and ongoing training requirements are met for all Core Primary Prevention providers.

APPROVED PROVIDERS

OCVA approved providers who have been conducting primary prevention activities must document that they have received 12 hours of WCSAP approved ongoing sexual assault training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet.

All ongoing training must be WCSAP approved.

NEW PROVIDERS

Providers who have not been approved by OCVA must attach the Initial Training Requirements for Primary Prevention Form (Attachment L) indicating they have completed 30-hour Sexual Assault Advocate Core training and the 5-hour web-based WCSAP prevention orientation. The prevention orientation online course can be accessed at the WCSAP website (www.wcsap.org) or at <http://www.wcsap.org/prevention-orientation-online-course>.

Enhanced Core Services

Due to the review of training documentation during the CSAP accreditation process, Core service providers do not need to submit additional training documentation with this application (unless you are conducting primary prevention activities, see above).

| Service | Training Requirement for New Providers | Already Approved? Ongoing Training Requirements |
|---|--|--|
| Therapy | 23-hour Therapist Core Sexual Assault Training | 6 hours of ongoing, sexual assault specific training |
| Support Groups | 30-hour Advocate Core Sexual Assault Training Training in Group Process and Interpersonal Dynamics | 12 hours of WCSAP approved ongoing, sexual assault specific training |
| Medical Social Work | 12 hours of initial training relevant to sexual assault | 12 hours of ongoing, sexual assault specific training |
| Culturally and Linguistically Appropriate Services and Activities | 15 hours of OCVA approved initial sexual assault training and 15 hours of OCVA approved culturally and/or linguistically appropriate initial sexual assault training | 12 hours of WCSAP approved ongoing, sexual assault specific training |
| Culturally and Linguistically Appropriate Primary Prevention | 15 hours of OCVA approved initial sexual assault training and 15 hours of OCVA approved culturally and/or linguistically appropriate initial sexual assault training 5-hour WCSAP Prevention Orientation | 12 hours of WCSAP approved ongoing, sexual assault specific training |
| Core Primary Prevention | 30-hour Advocate Core Sexual Assault Training 5-hour WCSAP Prevention Orientation | 12 hours of WCSAP approved ongoing, sexual assault specific training |

Application Summary

Following is an explanation of the required forms and/or materials applicants must submit:

Applicant Information – Attachment A

All applicants need to complete the Applicant Information Form.

Subcontractor Information – Attachment B

If this is a proposal with one lead agency and one or more subcontractors, complete the Subcontractor Information Form for each subcontractor.

Service Assessment and SFY 2017 Project Narrative – Attachment C

All applicants need to complete Service Assessment Form and SFY 2017 Project Narrative. This form is a tool for the grantee and the OCVA program coordinator to ensure that proposed services reflect the priorities of the community planning process. It is also an opportunity to address any implementation challenges that may have come up in year one.

A sample service assessment form and a sample project narrative are included for reference.

Proposed Services – Attachment D

All applicants need to complete the proposed services form. This form details the services that will be provided during SFY 2017 (July 1, 2016 – June 30, 2017) and will be used to develop your grant statement of work.

A sample proposed services form is included for reference.

Support Group Outline(s) – Attachment E

If the proposal includes support group services, a detailed outline that clearly identifies goals, objectives and session topics for each type of group must be submitted.

A sample support group outline included for reference

Budget Detail Worksheets – Attachment F

All applicants need to submit a budget for year two of the grant. [See pages 18 - 24](#) for additional guidance.

Budget Justification

Please provide a budget justification for expenses listed within each line item of your proposed budget at the bottom of each worksheet.

Modified Total Direct Costs Certification Form – Attachment G

Applicants opting to use this option for charging indirect costs will need to complete the certification form. [See page 22](#) for additional information.

Training Requirements and Qualifications – Attachments H, I, J, K and/or L

All providers of Specialized Sexual Assault Services must complete initial and ongoing training requirements. These requirements are summarized on [pages 25-29](#).

Additional information regarding training and qualifications is outlined in the Services Standards, Appendix A.

Application Checklist

Please use this checklist to make sure you have completed the required materials to send to OCVA.

- ☐ Attachment A: Applicant Information Form
- ☐ Attachment B: Subcontractor Information Form, *if applicable*
- ☐ Attachment C: Service Assessment Form and SFY 2017 Project Narrative
- ☐ Attachment D: Proposed Services Form
- ☐ Attachment E: Support Group Detailed Outline(s), *if applicable*
- ☐ Attachment F: Budget Detail Worksheets
- ☐ Attachment G: Modified Total Direct Cost Certification, *if applicable*
- ☐ Attachments H, I, J, K and L: Training Forms as needed ([see below](#))
- ☐ **NEW:** Staff position description(s) for grant-funded sexual assault staff
- ☐ **NEW:** Volunteer position description(s) for sexual assault services/program support
- ☐ Copy of Internal Revenue Service 501(c)(3) determination letter, *if applicable*
- ☐ One (1) clearly marked original and One (1) unbound copy

Training Forms

For Support Groups:

New Facilitators on this Grant:

- ☐ Training Summary for Support Group Facilitators (Attachment H)

OCVA-Approved Facilitators:

- ☐ Ongoing WCSAP approved training hours between July 1, 2015- June 30, 2016 documented in InfoNet

For Medical Social Work:

New Providers on this Grant:

- ☐ Resume
☐ Documentation of Initial Sexual Assault Training

OCVA-Approved Providers:

- ☐ Ongoing training hours between July 1, 2015-June 30, 2016 documented in InfoNet

For Therapy:

New Providers on this Grant:

- ☐ Training Summary for Therapists (Attachment I)
☐ Resume

OCVA-Approved Providers:

- ☐ Ongoing training hours between July 1, 2015-June 30, 2016 (refer to Attachment J) documented in InfoNet

For Culturally and Linguistically Appropriate Services and Activities

New Service Providers on this Grant:

- ☐ Training Summary for Community Organizing, Training and Education; Community Responding and/or Primary Prevention (Attachment K)

OCVA-Approved Service Providers:

- ☐ Ongoing WCSAP Approved training hours between July 1, 2015-June 30, 2016 documented in InfoNet

For Primary Prevention Providers

New Service Providers on this Grant:

- ☐ Initial Training Summary for Primary Prevention Activities (Attachment L)

OCVA-Approved Service Providers:

- ☐ Ongoing WCSAP Approved training hours between July 1, 2015-June 30, 2016 documented in InfoNet

If you are unsure whether you need to include any of these forms,
please contact OCVA.

Applicant Information Form

Complete All Required Fields

| | | | |
|---|---|---|--|
| Agency/Organization/Tribe/Tribal Organization Name: | | Accounting Period: (Ex: Jan – Dec; Jul – Jun) | |
| Address: | | Did your agency expend \$750,000 in federal funds during your past fiscal year? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| City: | State: | ZIP: | |
| Applicant is: <input type="checkbox"/> Local Government <input type="checkbox"/> Federally Recognized Tribe <input type="checkbox"/> Non-profit Organization <input type="checkbox"/> Tribal Organization (refer to Definition of Terms) | | | |
| Mailing address (if different than above): | | | |
| City: | State: | ZIP: | |
| Phone: | Fax: | E-mail: | |
| Primary Contact Name/Title: | Program Contact Name/Title: <i>if different than primary</i> | Fiscal Contact Name/Title: | |
| Primary Contact's Phone: | Program Contact's Phone: | Fiscal Contact's Phone: | |
| Primary Contact's E-mail: | Program Contact's E-mail: | Fiscal Contact's E-mail: | |
| Federal employer identification number: | | Washington State tax registration number (UBI# if applicable): | |
| For Agencies, Organizations, and Tribal Organizations Only Does the location where services are primarily provided comply with ADA requirements for accessibility? Yes <input type="checkbox"/> No <input type="checkbox"/> If No, how will you accommodate people with disabilities that request services? | | | |
| For Providers of Medical Social Work Only (Specialized Services) CVC Number: | | | |

Subcontractor Information Form

| | | |
|--|---------------------------|------|
| Subcontractor Name: | | |
| Address: | | |
| City: | State: | ZIP: |
| Mailing address <i>(if different than above)</i> : | | |
| City: | State: | ZIP: |
| Organization Phone: | Organization Fax: | |
| Primary Contact Person - and Job Title: | | |
| Primary Contact's Phone: | Primary Contact's E-mail: | |
| <p>Does the location where the subcontractor will provide services comply with ADA requirements for accessibility? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If No, how will you accommodate people with disabilities that request services <i>(attach an additional sheet if needed)</i>:</p> | | |
| <p>Did this subcontractor expend \$750,000 in federal funds during the past fiscal year?</p> <p><input type="checkbox"/>YES <input type="checkbox"/>NO</p> | | |

Service Assessment Form and SFY 2017 Project Narrative

The Service Assessment Form is a tool to help ensure that the services proposed for year two of the Specialized grant continue to reflect the priorities outlined in each region's community planning process.

In the first column of the form, list the services specific to your agency that were prioritized in the community planning process. In the second column, list each service that was provided in year one (SFY 2016) and share a bit about how it went. For example, did the support group happen? Was it successful? Why or why not?

In the third column, please provide a brief narrative describing the services you propose for year two of the grant (SFY 2017) and why. The rationale for the proposed services should be reflective of the community's prioritized services, what services have been provided, and any successes or challenges faced.



There is a sample included for reference.
The blank form can be found on the last page.

SAMPLE Service Assessment and SFY 2017 Project Narrative

year one = SFY 2016

year two = SFY 2017

| Community Planning Process: Please list all services specific to your agency that were prioritized in the community planning process, including any services not provided in year one. | Outcome of Year One Services: Share outcomes for each service, such as number of clients and hours of service. Describe any indicators of success and/or barriers to services. If a service was NOT provided, please tell us why. | Year Two Proposed Services Narrative: Describe the services proposed for year two and share why these are prioritized for this year. If you noted a barrier to a service and you are proposing it again this year, please describe a plan to address this. |
|--|--|--|
| System Coordination: increase collaboration and develop partnerships with other community groups and agencies to reach male victims and survivors | 10 contacts/meetings with groups/agencies regarding services for males– very successful Increase in referrals for male victims (5 referrals) – successful | Services to male survivors were prioritized in our community planning process (CPP) and our agency has been successful in our outreach and awareness efforts. Per these efforts we now have 5 people interested in a male survivors support group. We are planning one 8-week group, with 5-8 people. Support group services for adult female survivors of child sexual abuse was also prioritized in the CPP; however we continue to struggle to get participation in this group. We are available to provide the group if we can get enough participants. If not, we will develop an outreach strategy and talk to survivors about what may better meet their needs. If the support group continues to be unsuccessful we will increase advocacy and/or therapy services. Therapy for children, youth and adults continues to be a service in high demand and we will continue this work in year two, providing approximately 300 hours of therapy to 20 people. Historically the Specialized grant has enhanced our core advocacy services (general, legal and medical). As we continue to outreach and network with other providers regarding services to male survivors, we anticipate an increased need. The Where We Live curriculum is a well-respected child sexual abuse prevention curriculum; we will facilitate two rounds of this “class” in our community, each group consisting of 10 parents. |
| Support Group: adult male survivors | Support group: low demand therefore not provided, unsuccessful | |
| General, Legal and Medical Advocacy | An additional 20 victims served 74 hours of advocacy provided – very successful | |
| Therapy: children, youth, adults, both primary/secondary | Additional 350 hours of therapy services provided through specialized grant | |
| Support Group: Adult female survivors of child sexual abuse | Service not provided in year one, intend to provide in year two | |
| Prevention programs specific to preventing child sexual abuse | Service not provided year one. Conducted research on available programs, staff obtained required training, and conducted outreach to potential participants and system partners. | |

| <div>Service Assessment and SFY 2017 Service Plan</div> <div>year one = SFY 2016</div> <div>year two = SFY 2017</div> | | |
|---|--|---|
| <div>Community Planning Process:</div> <div>Please list <u>all services specific to your agency</u> that were prioritized in the community planning process, including any services not provided in year one.</div> | <div>Outcome of Year One Services:</div> <div>Share outcomes for each service, such as number of clients and hours of service. Describe any indicators of success and/or barriers to services.</div> <div>If a service was NOT provided, please tell us why.</div> | <div>Year Two Proposed Services Narrative:</div> <div>Describe the services proposed for year two and share why these are prioritized for this year.</div> <div>If you noted a barrier to a service and you are proposing it again this year, please describe a plan to address this.</div> |
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Year Two Proposed Services Form

This form outlines what you plan to accomplish in year two of the Specialized grant and should align with the SFY 2017 project narrative completed in Attachment C.

Please refer to the Service Standards for information about the kinds of activities that are eligible (Appendix A). Eligible services include:

- **Specialized Sexual Assault Services**
 - Therapy
 - Support Groups
 - Medical Social Work
 - **Services for Marginalized and Native American Communities**
 - Community Organizing, Training and Education
 - Community Responding
 - Primary Prevention
- **Enhanced Core Services**
 - Information, Referral, and Awareness
 - Crisis Intervention
 - General, Legal, and/or Medical Advocacy
 - System Coordination
 - Primary Prevention

A sample form is included for reference.
The blank form can be found on the last page.

Column 1 – Staff Name and Position

List the name and job title of the person providing the service.

Column 2 – Type of Service

List which Service Standard applies to the activity you want to do.

Column 3 – Activity and Geographic Area to Be Served

List the activity you are providing, and where you will be providing it (geographic area). If services will be provided in more than one county and/or geographic area, please indicate this (each area should be a separate line).

Column 4 – Description of Service and Population Served

Provide a brief description of the activity and include the specific community to receive the service.

Column 5 – Approximate Number of People to Receive Service

Provide an approximate number of how many people will receive the service.

Support Group and Therapy services have supervision and case consultation requirements. Please include the name(s) and title(s) of the individual(s) providing supervision and case consultation at the bottom of the form.

SAMPLE Year Two Proposed Services Form

| Staff Name and Position | Type of Service | Geographic Area to be Served | Description of Service & Population to be Served | Approx. # of People to Receive Service |
|--|---------------------------------|-------------------------------------|--|---|
| Kelly Doe Support Group Facilitator | Support Group | Fake County | Provide two 8-week groups for adult female victims of sexual assault | 10 |
| Tina Jones, Support Group Facilitator | Support Group | Fake County | Provide one 10-week group for male survivors of child sexual abuse | 8 |
| Tina Jones, Support Group Facilitator | Support Group | Fake County | Provide two 8-week groups for parents and non-offending caregivers of child victim of sexual abuse | 10 |
| Nicole Smith Therapist | Therapy | Fake County | Provide Individual Therapy to female adolescent victims of sexual assault | 15 |
| Ron Foster Therapist | Family Therapy | Fake County | Provide Family Therapy for families of male victims of sexual abuse | 6 |
| Nicole Smith Ron Foster Therapists | Group Therapy | Fake County | Provide two 8-week Therapy Groups for male adolescent survivors of child sexual abuse | 6 |
| Jill Lyon Nurse Practitioner | Medical Social Work | Fake County | Provide Medical Social Work for child and vulnerable adult victims of sexual abuse and assault | 75 |
| Hope Springs, Advocate | Community Organizing - Outreach | Fake County | Provide outreach to inform the Hispanic/Latino community about sexual abuse/assault and available services | 75 |
| Hope Springs, Advocate | Community Responding | Fake County | Provide assistance and support to victims of sexual abuse/assault in the Hispanic/Latino community | 30 |
| Hope Springs, Advocate | Primary Prevention | Fake County | 5-session workshop focusing on healthy relationships | 30 |

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| Year Two Proposed Services Form |
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| Staff Name and Position | Type of Service | Geographic Area to be Served | Description of Service & Population to be Served | Approx. # of People to Receive Service |
|------------------------------------|----------------------------|---|---|---|
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For Support Group and Therapy Services: Supervision and case consultation are a grant requirement. Please list the name(s) and title of the individuals providing this below.

Support Group Facilitators:

Supervision provided by:

Masters Level Consultation provided by

Therapists:

Regular supervision, consultation and/or review of cases provided by:

Support Group Outline Form

For each Support Group, complete this Support Group Outline Form or provide your own detailed outline.

Agency Name: _____

Name/population of group: _____ **Number of Sessions:** _____

Complete the following outline with a session number, topic heading, and description of the group session. Use additional pages as needed. You may attach a copy of your own support group outline as long as it has all of the required information. *Note: The “goal” is where you want the group to get to and the “objective” is how to get there.*

[illegible]

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name: _____

Salaries - List each position to be paid with these grant funds by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to Specialized Services. Salaries may include individuals providing direct services, supervision, or support staff.

FTEs must be calculated using 40 hours per week. See the section *Budget Line Items and Guidance* for more details.

| Name/Position (sample) | Annual Salary or Hourly Salary (sample) | Annual Computation based on FTE (sample) | Cost for Specialized Services (sample) |
|--|---|---|--|
| Jane Doe/Advocate and Support Group Facilitator | \$26,000 | 50% (.50 FTE) | \$13,000 |
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| | | TOTAL SALARIES | \$ - |

Total FTE for Specialized Services: _____

List activities associated with all positions above:

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name: _____

Benefits - Must be for the personnel named in Salaries. Benefits should be based on actual known costs or an established formula. Benefits should only be for the percentage of time devoted to these services. Only the allowable portion of costs such as employer payroll taxes, insurance, and other fringe benefits for personnel listed on Salaries worksheet may be included in this category.

| Benefit Description for Name/Position (sample) | Annual Cost (sample) | Annual Computation based on FTE (sample) | Cost for Specialized Services (sample) |
|---|-------------------------|---|---|
| Medical for Jane Doe/Advocate and Support Group Facilitator | \$7,800 | 50% (.50 FTE) | \$3,900 |
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| TOTAL BENEFITS | | | \$ - |

List details associated with all benefits listed above, if needed:

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name: _____

Subcontracted Services and Consultant Fees - List subcontractors needed to provide services.

Consultants/Trainers/Therapists compensation cannot exceed \$650 per day (excluding travel and per diem) for an eight-hour day or cannot exceed \$81.25 per hour for less than an eight hour day. The grantee agrees that if the rate exceeds \$650 per day or \$81.25 per hour the Washington State funded portion of the grant will cover the cost of the subcontracted service.

| Subcontracted Service/Consultant | Computation | Cost for Specialized Services |
|----------------------------------|--|-------------------------------|
| (sample) | (sample) | (sample) |
| Jenny Doe, Therapist | 60 one hour therapy sessions @ \$65/hour | \$3,900 |
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| TOTAL SUBCONTRACTED SERVICES | | \$ - |

Provide a description of the services that will be performed by subcontractors, such as therapists, trainers, and speakers.

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name:

Goods and Services - Goods and services must be related to the provision of Specialized Services under this grant. Only those costs, such as supplies, utilities, rent, professional liability insurance, travel and telephone that are incurred providing services under this grant can be included here. Attach an additional page, if needed, to provide complete information.

| Item Description | Computation | Cost for Specialized Services |
|---------------------------------|------------------------------|-------------------------------|
| (sample) | (sample) | (sample) |
| Cell Phone for Advocate | \$65/month x 12 months x .50 | \$390 |
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| TOTAL GOODS AND SERVICES | | \$ - |

Do you request OCVA use the state funded portion of the grant to cover the costs related to establishing or supporting a computer network? _____ If so, what line item contains these expenses? _____

For a description of the options, please see the Special Terms and Conditions section of the application.

Describe the costs above and list activities associated with these items. Attach separate pages as needed.

All associated travel costs shall be billed in accordance with the State of WA OFM travel regulations.

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| BUDGET DETAIL WORKSHEET |
|--------------------------------|

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name:

Administrative - USE THIS WORKSHEET IF YOU ARE DIRECTLY CHARGING ADMINISTRATIVE COSTS.

This may include both administrative costs and/or facilities costs to run your overall organization. This could include a portion of the salaries and benefits of an executive director, accountant, computer specialist, and/or a portion of associated costs for these types of functions such as supplies, general building and office equipment and maintenance. The portion of these administrative costs billed to the grant must be connected to the grant program, and cannot total more than 15% of the grant total.

| Name/Position OR Item Description | Computation | Cost for Specialized Services |
|-----------------------------------|-------------------------------|-------------------------------|
| (sample) | (sample) | (sample) |
| Jessie Doe, receptionist | based on FTE; \$28,000 x 0.10 | \$2,800 |
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| TOTAL ADMINISTRATIVE | | \$ - |

Describe the costs above and list activities associated with these items.

OCVA needs to verify that the costs are connected to the program and there is a cost allocation rationale.

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| BUDGET DETAIL WORKSHEET |
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SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name: _____

Indirect - USE THIS WORKSHEET ONLY IF YOU ARE UTILIZING AN INDIRECT RATE.

There are two Indirect options (see Budget Line Items and Guidance section for more information):

1. 10% of the Modified Total Direct Costs
2. Federally Negotiated Indirect Cost Rate

| Indirect Method <i>check which Indirect method you are using:</i> | | Additional Documentation Needed |
|---|---|--|
| <input type="checkbox"/> | 10% of the Modified Total Direct Costs | Complete the 10% MTDC certification form (Attachment G) |
| <input type="checkbox"/> | Federally Negotiated Indirect Cost Rate | Include a copy of the approval from the cognizant federal agency of the federal Negotiated Indirect Cost Rate. |

| |
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| BUDGET DETAIL WORKSHEET |
|--------------------------------|

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name: _____

Budget Summary - When you have completed the budget detail worksheets, transfer the totals for each category to the spaces below.

| | |
|--|----|
| If applicable, indicate amount of Specialized Sexual Assault Services funding allocated for Core Services or Community Organizing, Training and Education; Community Responding; or Primary Prevention Services: | \$ |
|--|----|

| <u>Budget Line Items</u> | <u>Specialized Services Amount</u> |
|----------------------------|------------------------------------|
| Salaries | \$ - |
| Benefits | \$ - |
| Subcontracted Services | \$ - |
| Goods and Services | \$ - |
| Administrative OR Indirect | \$ - |
| Total Grant Amount | \$ - |

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name:

Budget Cuts - In priority order, identify what should be cut from your proposed grant budget should fewer dollars be available. Total budget cuts should equal, or be close to 3% of your proposed SFY 2017 Specialized Sexual Assault Services budget. Provide ALL information requested.

| Line Item Category and Item Description | Computation | Amount |
|--|-----------------------------|----------|
| (sample) | (sample) | (sample) |
| Goods and Services - Healing Workbook for Support Groups | \$15 each x 30 participants | (\$450) |
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| TOTAL CUTS | | \$ - |
| Provide a description of the expenses to be cut from your proposed budget. | | |

BUDGET DETAIL WORKSHEET

SFY 2017 Specialized Sexual Assault Services Renewal Application

Agency/Tribe/Tribal Organization Name:

Budget Adds - In priority order, identify what should be added to your proposed grant budget should additional dollars be available. Total budget adds should equal, or be close to 3% of your proposed SFY 2017 Specialized Sexual Assault Services budget. Provide ALL information requested.

| Line Item Category and Item Description (sample) | Computation (sample) | Amount (sample) |
|--|---------------------------------------|--------------------|
| Goods and Services - Emergency Client Funds | \$15 gas cards x 30 victims/survivors | \$225 |
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| | | |
| TOTAL ADDS | | \$ - |
| Provide a description of the expenses to be added to your proposed budget. | | |

10% of the Modified Total Direct Costs (MTDC) Certification Form

Applicants utilizing the indirect rate option of 10% of the Modified Total Direct Costs must obtain certification of the calculation by a CPA (if a nonprofit or a Tribe), or county auditor/treasurer (if a government entity).

_____ would like to use the 10% MTDC indirect rate.
(organization name)

MTDC total (for this grant): \$ _____

10% of that total: \$ _____
(indirect budget total)

The calculation of our organization's MTDC is certified by:

Name

Organization / Title

Signature

Date

Modified Total Direct Cost¹ is defined as: *All direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and sub-awards and subcontracts up to the first \$25,000 of each sub-award or subcontract (regardless of the period of performance of the sub-awards and subcontracts under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each sub-award and subcontract in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.*

¹ Federal Management and Budget Office (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, December 26, 2014 <https://federalregister.gov/a/2013-30465>

Initial Sexual Assault Training Summary For Support Group Facilitators

Who needs to complete this form: Support Group facilitators that have not been previously been approved by OCVA.

Purpose: To ensure providers of support groups have basic (core) knowledge about the dynamics of sexual violence, group process and interpersonal dynamics.

Requirements: Document you have received a minimum of thirty hours of WCSAP approved training in core sexual assault issues and have received training in group process and interpersonal dynamics. All thirty hours of training must have been received in the past five years from the date of proposal.

How to document initial training: Complete attached form; attend a Washington Coalition of Sexual Assault Programs (WCSAP) certified 30-hour core training offered by a Community Sexual Assault Program (CSAP) or by WCSAP, obtain training in group process and interpersonal dynamics, and document prior experience as a facilitator or co-facilitator.

How to document ongoing training: Support Group Facilitators that have already been approved by OCVA and who have been providing Specialized Sexual Assault Support Group Services must document that they received 12 hours of ongoing, sexual assault specific training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet. **All ongoing training must be WCSAP approved.**

INITIAL SEXUAL ASSAULT TRAINING SUMMARY FOR SUPPORT GROUP SERVICES FACILITATORS

Name: _____

Organization/Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

If proposed provider does not currently meet all the training and experience required in the first column, the provider is not approved to facilitate a support group until OCVA has received documentation of training and approved the provider.

| In the last five years I have completed 30 hours of WCSAP Certified Core Sexual Assault Training | # of Hours of Training Received | Date/s of Training | Name of CSAP/provider that provided the training | County in which training was held |
|---|--|--|--|--|
| _____ Yes _____ No If no, what is your plan to complete? | | | | |
| Training in Group Process and Interpersonal Dynamics | # of Hours of Training Received | Date/s of Training | Who provided the training? Agency/Person's Position | |
| _____ Yes _____ No If no, what is your plan to complete? | | | | |
| Experience as a Support Group Facilitator or Co-Facilitator | Date/s of Support Group | Name of CSAP/agency that provided the training/experience | | |
| _____ Yes _____ No If no, what is your plan to complete? | | | | |

FOR OCVA USE:approved ☐training log updated ☐

Initial Sexual Assault Training Summary For Therapists

Purpose:

OCVA has initial training requirements in order to ensure providers of sexual assault therapy services have core knowledge about the dynamics of sexual violence. This standard reflects a philosophical approach to services which emphasizes an empowerment model to working with survivors of sexual violence. Although numerous therapeutic modalities exist, the standard focuses on this model because of the model's client-centered nature and its potential to support survivors of sexual violence in reclaiming power in their lives. Thus, services are approached from a client-centered belief that survivors possess the strengths to create growth in their lives and to construct their own meaning from their victimization experience. The empowerment approach also places survivors in the context of their environment and society. From this perspective, clients' struggles are viewed not as individual pathology, but as the natural result of experiencing sexual violence, which is largely perpetuated by our societal context. The following training standards are intended to reflect these principles and to support therapists in empowering survivors of sexual violence.

Who needs to complete this form:

Therapists who are not approved providers by OCVA and who will be providing services funded by OCVA through a service grant or subcontract.

Requirements:

Therapists who have not been approved as a provider need to document they have received a minimum of 23 hours of training in core sexual assault issues.

All 23 hours of core training must have been received in the past five years from the date of proposal.

Therapists providing services with this funding are required to have a Master's degree. Thus, coursework in a Master-level program will not substitute for initial or ongoing training requirements.

Therapists who have not been approved as a provider will be required to obtain the minimum 23 hours of training within their first six months of their granted work. During this first six months, these therapists can provide services to clients.

How to Obtain Initial Core Training:

Complete the attached form that confirms attendance at a 23-hour therapist core training offered by the Washington Coalition of Sexual Assault Programs (WCSAP).

OR

Contact your OCVA Sexual Assault Program Coordinator to discuss additional options, such as requesting a waiver or an exemption to attending the WCSAP Therapist Core Training.

If, at the time of proposal, the therapist has not completed the 23-hour Sexual Assault Core Training, include a training plan for the completion of the training requirements.

How to Document Ongoing Training:

Therapists who have been approved by OCVA and who have been providing Therapy Services, must document that they received 6 hours of ongoing, sexual assault specific training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet. Approved topics and documentation requirements are listed in Attachment H.

INITIAL SEXUAL ASSAULT TRAINING SUMMARY FOR THERAPISTS

Name: _____

Organization/Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ FAX: _____

| In the last five years I have completed the 23-hour Therapist Core Sexual Assault training from WCSAP. | # of Hours of Training Received | Date/s of Training | Location of training |
|---|---------------------------------|--------------------|----------------------|
| _____ Yes (Please submit a copy of Certificate of Training Completion with this proposal form) | | | |
| _____ No , but I will attend the 23-hour WCSAP Therapist Core Sexual Assault Training within the first six months of providing therapy services. (Please complete training plan below) | | | |

My Training Plan to Complete the Therapist Core Training Requirements
(Complete only if you have not fulfilled the required training requirements):

_____ I will attend the WCSAP Therapist Core Training within the next 6 months.

If you are unable to attend a WCSAP Therapist Core training, or would like to discuss other options for meeting this requirement (such as requesting a waiver or an exemption to attending), please contact your OCVA Sexual Assault Services Program Coordinator.

I verify that all the information provided on this proposal is true and accurate.

Signature: _____ Date: _____

FOR OCVA USE:approved ☐training log updated ☐

Ongoing Sexual Assault Training for Therapists

All therapists must complete a minimum of 6 hours of sexual assault training each State fiscal year (July 1 to June 30) following the State fiscal year in which they became an approved provider. Topics listed below are eligible subjects for this ongoing training requirement. OCVA will not accept non-sexual assault specific trainings for this ongoing requirement. Informal trainings such as consultation or individual supervision on these topic areas will not be acceptable substitutes.

In **InfoNet**, document the training(s) each therapist attended July 1, 2015 – June 30, 2016. Please include: therapist name, dates of training, number of hours, name of trainer/training and the sponsoring organization.

- | | |
|--|---|
| <ul style="list-style-type: none"> • Research based Intervention and Treatment Plans • PTSD and Differential Diagnosis • Sexual Development • Gender Differences • Cultural Competency • Client/Therapist relationship boundaries • Therapist Neutrality • Establishing Safety • Impact on Client Relationship • Clinical Supervision and Consultation • Clarification of Clinical and Forensic Objectives and Roles • Mandatory Reporting • Understanding juvenile and adult offender behavior • Understanding sexually reactive behavior or sexual behavior problems of children under 12 years old • Interfamilial sexual assault • Trauma and brain development • Sexual assault in the context of domestic violence • Treatment with non-offending caregivers, partners, or family members of victims • Issues of memory and suggestibility • Child development and its proposal to victims • Human growth and development and its proposal to victims | <ul style="list-style-type: none"> • Personality development and its proposal to victims • Transference/counter transference • Ethics and/or record keeping • Differentiating diagnosis – therapeutic approaches • Interviewing and assessing children • Treating sexually reactive behavior in the context of abuse focused therapy • Providing clinical supervision • Sexuality issues of sexual assault victims • Impact of trauma on attachment • Dissociative disorders • Chemical dependency and the sexual assault victim • Reunification practice for incest families • Group treatment • Resiliency • Non-cognitive behavioral approaches to treatment as they relate to sexual assault focused therapy (ie. EMDR, sand tray) • Clinicians and the legal system: preparing clients for court and clinicians preparation for court testimony • Crime Victims Compensation • Community Protocols • Working with the medical community • Complex cases involving multiple victims/multiple offender |
|--|---|

Initial Sexual Assault Training Summary For Culturally and Linguistically Appropriate Advocacy

Who needs to complete this form: Advocates and their supervisors that are proposing to provide culturally and linguistically appropriate advocacy who have not been previously been approved by OCVA.

Purpose: To ensure providers have basic knowledge about the dynamics of sexual violence as well as knowledge about the population or community these services will be offered to.

Requirements: 15 hours OCVA approved initial sexual assault training (basic training) as well as 15 hours OCVA approved culturally and linguistically appropriate initial sexual assault training.

How to document initial training: Complete the attached form by reviewing the training requirement grid and filling out form; attend 15 hours of an OCVA approved basic training (such as those offered by a Community Sexual Assault Program (CSAP) or by WCSAP) and obtain training in providing culturally and linguistically appropriate sexual assault services.

If you think you have past experience that could potentially meet these initial training requirements, please contact your OCVA Sexual Assault Services Program Coordinator to discuss the option of applying this towards the completion of your initial training requirements.

How to document ongoing training: Providers that have already been approved by OCVA and who have been providing Community Organizing, Training and Education; Community Responding; or Primary Prevention Services, must document that they received 12 hours of ongoing, sexual assault specific training in the past fiscal year (July 1, 2015 – June 30, 2016) in InfoNet. **All ongoing training must be WCSAP approved.**

Initial Training Requirements

| Basic Training 15 hours total | Culturally and Linguistically Appropriate Training 15 hours total |
|---|---|
| Cluster 1 Philosophical Foundations (3.5 hours) | Cluster 1 Philosophical Foundations (4 hours) |
| <ul style="list-style-type: none"> • Philosophy • Underlying conditions contributing to sexual violence • Empowerment • Confidentiality | <ul style="list-style-type: none"> • Boundaries • Cultural interpretation of sexual assault/view of sexual assault/abuse from the community's perspective • Culturally traditional responses to sexual violence |
| Cluster 2 Crisis Intervention/Support/Information and Referral (3.5 hours) | Cluster 2 Crisis Intervention/Support/Information and Referral (6 hours) |
| <ul style="list-style-type: none"> • Definitions and continuum of sexual violence • Dynamics of sexual assault • Effects of Victimization • Advocacy and Counseling Skills | <ul style="list-style-type: none"> • Advocacy and Counseling Skills • Listening and Communication • Grief and Coping Skills • Empathy • Resiliency factors and coping mechanisms often used by community |
| Cluster 3 Navigating through systems (5 hours) | Cluster 3 Navigating through systems (2 hours) |
| <ul style="list-style-type: none"> • Rights of Victims • CVC • Components of Legal Advocacy • Criminal Justice Process • Crime Reporting and Mandated Reporting • Civil and Criminal Court orders • Medical Advocacy in victim's community | <ul style="list-style-type: none"> • Medical Advocacy in victim's community • Paperwork • Community Resources |
| Cluster 4 Working Collaboratively (3 hours) | Cluster 4 Working Collaboratively (3 hours) |
| <ul style="list-style-type: none"> • Role Clarification and Professional Boundaries • How local agencies are connected • Mandated reporting • Accessing Additional Services/Referrals | <ul style="list-style-type: none"> • Role Clarification and Professional Boundaries • Service Standards • Mandated reporting • Accessing Additional Services/Referrals |

| |
|--|
| <p style="text-align: center;">INITIAL SEXUAL ASSAULT TRAINING SUMMARY FOR COMMUNITY ORGANIZING, TRAINING AND EDUCATION; COMMUNITY RESPONDING SERVICES; and PRIMARY PREVENTION ACTIVITIES</p> |
|--|

Only complete this form if you are an advocate, prevention educator, or a supervisor and you have not previously been approved by OCVA.

If you have already been approved, please report your required ongoing training hours in InfoNet in the Staff Training section.

Please make additional copies of this form for each new person on the application.

Staff, Volunteer, or Supervisor Name: _____

Basic Training - 15 Hours

Please check all that apply:

- ☐ Staff, volunteer, or supervisor attended OCVA approved training(s) that meets all required topics listed for Cluster 1, 2, 3, and 4 of the Basic Training. Please attach verification of training attendance, such as a training certificate.
- ☐ Staff, volunteer, or supervisor attended a CSAP or WCSAP Core Advocate Training within the last 5 years. Please attach verification of training attendance, such as a training certificate.
- ☐ Staff, volunteer, or supervisor has 2 years of experience providing sexual assault services. Please attach a resume.

OR

- ☐ None of the options listed above describes my situation. By signing below I agree that the staff, volunteer, or supervisor will meet training requirements before providing services with this funding. The training plan is:

Signature _____

Date _____

Culturally and Linguistically Appropriate Training – 15 Hours

Please check all that apply:

- ☐ Staff, volunteer, or supervisor has 2 years of experience providing social services in the proposed community. Please attach a resume.
- ☐ Staff, volunteer, or supervisor attended OCVA approved training(s) that meets all required topics listed for Cluster 1, 2, 3, and 4 of the Culturally and Linguistically Appropriate Training requirements. Please attach verification of training attendance, such as a training certificate.

OR

- ☐ None of the options listed above describes my situation. By signing below I agree that the staff, volunteer, or supervisor will meet training requirements before providing services with this funding. The training plan is:

Signature _____ Date _____

If proposed provider does not currently meet all the training and experience required, the provider is not approved to provide services until OCVA has received documentation of training and approved the provider.

FOR OCVA USE:

approved ☐
training log updated ☐

Initial Sexual Assault Training Summary For Primary Prevention Activities

Who needs to complete this form: Advocates, prevention educators, and their supervisors that are proposing primary prevention services¹ who have not been previously been approved by OCVA.

Purpose: To ensure providers have basic knowledge about primary prevention theory, strategies, and approaches that prevent sexual violence before it happens.

Requirements: 5 hour online Washington Coalition of Sexual Assault Programs (WCSAP) prevention orientation. 30 hours of OCVA or WCSAP approved initial sexual assault training; either 30 hours core training for Core service providers **or** 15 hours basic training and 15 hours culturally and linguistically appropriate training for Marginalized and Native American Communities service providers.

How to document initial training: Complete the 5 hour online prevention orientation and attend 30 hours of an OCVA or WCSAP approved initial sexual assault training. Complete the attached form.

How to Document Ongoing Training: Providers that have already been approved by OCVA and who have been conducting Primary Prevention activities must document in InfoNet that they received 12 hours of ongoing sexual assault specific training during the past fiscal year (July 1, 2015 – June 30, 2016). **All ongoing training must be WCSAP approved.**

¹ Primary Prevention service standard (See Appendix A).

**Sexual Assault Services
PRIMARY PREVENTION ACTIVITIES
Initial Training Requirement**

If proposing Primary Prevention activities, complete this form for all new providers and supervisors who have not previously been approved by OCVA to conduct Primary Prevention activities.

If you have already been approved, please report your required ongoing training hours in InfoNet in the Staff Training section.

Please make additional copies of this form for each new person on the application.

Staff, Volunteer, or Supervisor Name: _____

Primary Prevention Orientation – 5 hours

I certify that the staff, volunteer, and/or supervisor named above has completed the 30 hours of OCVA or WCSAP approved initial sexual assault training AND the 5 hour online WCSAP prevention orientation.

☐ Please include copy of prevention orientation training documentation.

Signature _____ Date _____

If proposed provider does not currently meet all training requirements they are not approved to conduct primary prevention activities.

FOR OCVA USE:
approved ☐
training log updated ☐

Appendix A

**Washington State
Department of Commerce
Office of Crime Victims Advocacy**

State of Washington Sexual Assault Services Standards

**Core Services for Accredited
Community Sexual Assault
Programs Only**

Information, Referral and Awareness
Crisis Intervention
General Advocacy
Legal Advocacy
Medical Advocacy
System Coordination

OPTIONAL:
Primary Prevention

Specialized Services

Support Group
Therapy
Medical Social Work

**Services for Marginalized and Native
American Communities**

Community Organizing, Training and
Education
Community Responding
Primary Prevention
Therapy

**Washington State
Department of Commerce
Office of Crime Victims Advocacy**

State of Washington Sexual Assault Services Standards

Core Services for Accredited Community Sexual Assault Programs (CSAPs)

**Information, Referral and Awareness
Crisis Intervention
General Advocacy
Legal Advocacy
Medical Advocacy
System Coordination**

OPTIONAL:

Primary Prevention

INFORMATION, REFERRAL and AWARENESS

| | |
|-----------------------|---|
| Definition | <p>This standard has two purposes:</p> <ul style="list-style-type: none"> ■ Responding 24 hours a day in person or by phone to direct requests for information or assistance related to sexual abuse/assault and available services. ■ Conducting community awareness activities related to sexual abuse/assault and available services to the community at-large. |
| Goal | To provide sexual abuse/assault related information and resources. |
| Duration | Information and referral contacts are usually one-time. Awareness activities are usually one-time, but may reoccur. |
| Activities | <ul style="list-style-type: none"> ■ Assist individuals in evaluating what is needed including available and appropriate services and/or resources. ■ Provide information verbally or in writing such as: <ul style="list-style-type: none"> ▪ Available services (including advocacy services provided by the CSAP) ▪ Referrals to appropriate and relevant resources addressing individuals' needs ▪ Information regarding sexual abuse/assault <p>Information may be provided through:</p> <ul style="list-style-type: none"> ▪ Individual contact ▪ Outreach to underserved communities ▪ Distribution of Materials ▪ Public Speaking/Presentations ▪ Community Education Events |
| Recipients | <p>Any community members such as:</p> <ul style="list-style-type: none"> ■ Non-offending parents of child victims ■ Victims/Survivors ■ Significant others who require assistance in order to address their own reactions to the victimization and to effectively support the victim ■ Those whose work brings them into contact with people who have been victimized: health care, mental health, education, law enforcement, legal, social service personnel ■ Community groups ■ Marginalized and Native American communities ■ General community |
| Qualifications | <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (core curriculum and ongoing training). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p> |

| CRISIS INTERVENTION | |
|----------------------------|--|
| Definition | An immediately available 24-hour personal response provided in a variety of settings to an individual presenting a crisis related to sexual abuse/assault. |
| Goal | To alleviate acute distress of sexual abuse/assault, to begin stabilization, and assist in determining the next steps. |
| Duration | Short term. May be episodic. |
| Activities | <p>Activities to alleviate acute stress including:</p> <ul style="list-style-type: none"> ■ Information about the effects of victimization ■ General information about medical and legal issues (Case specific information – see Legal/Medical Advocacy) ■ Information on services available in the community |
| Service Recipients | <ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult or adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim |
| Qualifications | <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of crisis intervention, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (core curriculum and ongoing training). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p> |

GENERAL ADVOCACY

| | |
|---------------------------|---|
| Definition | Personal support and/or assistance in accessing sexual abuse/assault related services. |
| Goal | To ensure needed services and adequate support to enhance recovery from sexual abuse/assault |
| Duration | Generally, 1 to 4 times per month; 3 months to a year |
| Activities | <p>All activities and services are client-focused and case specific.</p> <ul style="list-style-type: none"> ■ Ongoing personal support, including outreach calls/visits (including in-patient or residential care settings) ■ Practical help as needed; information and referrals which are case specific and client focused ■ Ongoing, repetitive crisis intervention ■ Arranging for services to enhance recovery (e.g., health, financial, housing) ■ Consulting with others (such as CPS, APS, Indian Child Welfare) regarding an individual case |
| Service Recipients | <ul style="list-style-type: none"> ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim |
| Qualifications | <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (core curriculum and ongoing training). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p> |

LEGAL ADVOCACY

| | |
|---------------------------|---|
| Definition | Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld. |
| Goal | To assist gaining knowledge of the criminal justice system, gain access to all avenues of participation in the legal system and to promote the responsiveness of individual legal system participants. |
| Duration | Up to several years |
| Activities | <p>All activities and services are client-focused and case specific. For general information regarding legal advocacy, see Information & Referral.</p> <ul style="list-style-type: none"> ■ Assistance in making informed decisions about police reporting and the preparations needed, including the possibility of CVC benefits ■ Information about the criminal justice systems, civil remedies, and Dependency, Family and Juvenile Courts, including follow-up ■ Support at interviews, trial and sentencing ■ Assistance in preparing for court; informing the victim of her/his rights in legal settings ■ Active monitoring of case through the legal system ■ Assistance with protective/no-contact/anti-harassment orders |
| Service Recipients | <ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim |
| Qualifications | <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of legal advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (core curriculum and ongoing training). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p> |

MEDICAL ADVOCACY

| | |
|---------------------------|---|
| Definition | Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld. |
| Goal | To assist the victim to regain personal power and control as s/he makes decisions regarding medical care and to promote an appropriate response from individual service providers. |
| Duration | May vary significantly depending upon client's medical needs as related to the sexual assault. |
| Activities | <p>All activities and services are client-focused and case specific. For general information regarding medical advocacy, see Information & Referral.</p> <ul style="list-style-type: none"> ■ Assistance in making informed decisions about medical care and the preparations needed, including referral for possible forensic exam ■ Information about medical care/concerns, including assistance with needed follow-up ■ Support at medical exams and appointments ■ Information and/or assistance with Crime Victim Compensation applications |
| Service Recipients | <ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult/adolescent sexual abuse/assault victims ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim |
| Qualifications | <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of medical advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (core curriculum and ongoing training). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p> |

SYSTEM COORDINATION

| | |
|-------------------------------|---|
| Definition | Coordination of the service system entails the development of working relationships and agreements (formal and informal) among programs and services with a role in the array of sexual abuse/assault service provision with the goal of improving service delivery |
| Goal | To operate a permanent, client-centered system which offers, or assures access to, a comprehensive continuum of specialized sexual abuse/assault services, which is mutually accountable despite individual changes over time in regulations, procedures or people who provide service. |
| Duration | An on-going process |
| Eligible Activities | <ul style="list-style-type: none"> ■ Develop partnerships ■ Increase collaboration ■ Assess gaps in service ■ Foster cooperation ■ Develop accountability process ■ Develop new ways of delivering services |
| Potential Participants | <ul style="list-style-type: none"> ■ Law enforcement ■ Prosecutors ■ Judiciary ■ Child Protective Services (CPS) ■ Schools ■ Social services (private and public) ■ Mental health services ■ Medical facilities/practitioners ■ Emergency services ■ Other relevant groups, task forces, networks and individuals |
| Qualifications | <p>System coordination should be initiated and led by a Community Sexual Assault Program.</p> <p>The staff and volunteers representing the Community Sexual Assault Program should represent the issues of sexual abuse/assault to the community accurately, fairly and regularly. They should understand the public policy-making process, build coalitions and articulate opinion to shape public policies that are beneficial for the organization and victims of sexual abuse/assault.</p> <p>They should commit to building community around sexual abuse/assault issues; promote effective relations among diverse agencies working with victims of sexual abuse/assault; facilitate cooperation between all of the agencies/organizations involved with victims of sexual abuse/assault.</p> <p>They also should encourage cooperation and collaboration with other organizations, seeking ways to improve services and/or reduce costs through cooperative efforts; share expertise with others to achieve partnerships; and organize and operate partnerships effectively.</p> |

OPTIONAL STANDARD

Primary Prevention

| PRIMARY PREVENTION | |
|---------------------|---|
| Definition | Comprehensive activities that promote attitudes, behaviors, and social conditions aimed at preventing sexual violence before it happens. Primary prevention programming must be culturally and linguistically appropriate specific to the identified community. |
| Goal | To prevent sexual violence in communities and increase the willingness of communities to prevent sexual violence. |
| Activities | <p>Activities will vary from community to community and population to population. Appropriate activities are those aimed at preventing sexual violence before it occurs. Examples Include:</p> <ul style="list-style-type: none"> • A program or set of multi-session skill-building activities informed by community or cultural norms • A multisession set of activities on a topic logically connected with prevention (such as communication, parenting, trust, gender, boundaries, respect, building assets, social norms) • Prevention activities aimed at two or more of the four different levels of influence: individual, relationship, community, and society. This might combine education (individual) with policy examination (community) or media work (society) with peer education (relationship)¹ • Community development or other community-led processes and activities that are logically connected to preventing sexual violence and shifting ownership of prevention from the organization leading the initiative to the community. <p>The community development process is inclusive of:</p> <ol style="list-style-type: none"> 1. Establishing relationships within communities, ensuring the inclusion of marginalized and underserved communities 2. Recruiting stakeholders from a chosen community 3. Asking: Why does sexual violence happen here? (A) 4. Asking: What would it be like without sexual violence? (B) 5. Developing a plan to get from A to B 6. Asking: how will we know we are accomplishing anything? 7. Carrying out the plan 8. Evaluation and revision |
| Participants | <p>Individuals, a group of stakeholders or other groups within the identified community² such as:</p> <ul style="list-style-type: none"> ■ Youth ■ Parents/Caregivers ■ Community Members ■ Service Providers |

¹ Levels of influence from the Social Ecological Model of Prevention, (National Center for Injury Prevention and Control, Centers for Disease Control and Prevention).

² A community is any definable group of people who share concerns or interests

| | | |
|-----------------------|---|---|
| Qualifications | <p>Services must be provided by a community sexual assault program (CSAP) or a community-based non-profit organization, with a primary mission and history of serving a marginalized community³ Tribe or tribal organization⁴.</p> | |
| | <p><u>Direct Service Provider</u></p> <p>Initial Training: 30 hours OCVA or WCSAP approved initial sexual assault training.</p> <p>5-hour WCSAP prevention orientation.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> | <p><u>Supervisor</u></p> <p>Initial Training: 30 hours OCVA or WCSAP approved initial sexual assault training.</p> <p>5-hour WCSAP prevention orientation.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> <p>Education/Experience:</p> <p>CSAP: two years of experience in sexual assault or domestic violence services.</p> <p>Marginalized community-based organization, Tribe, or tribal organization: two years of experience in culturally and linguistically appropriate sexual assault or domestic violence services.</p> <p>Other direct human service experience will be considered on a case-by-case basis.</p> |

March 2015

³ Marginalized communities include, but are not limited to: lesbian, gay, bisexual, transgender and queer communities; individuals with disabilities; ethnic and racial communities; and Native American communities.

⁴ Tribal organizations are non-profit organizations administered by Native Americans and whose primary mission is to serve Native Americans.

**Washington State
Department of Commerce
Office of Crime Victims Advocacy**

State of Washington Sexual Assault Services Standards

Specialized Services

Support Group

Therapy

Medical Social Work

SUPPORT GROUP

| | |
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| Definition | Regular facilitated meetings of victims and/or secondary victims of sexual abuse/assault with a supportive and educational focus. |
| Goal | To provide emotional stability and promote the understanding of the impact of sexual abuse/assault. |
| Duration | 1 to 2 hour average length of time per session; 1 to 4 sessions per month; 3 months to a year |
| Activities | Group meetings with a planned beginning and ending date and an outcome-based, structured agenda with a primary focus on sexual abuse/assault issues. |
| Service Recipients | <ul style="list-style-type: none"> ■ Adult or adolescent sexual abuse/assault victims ■ Non-offending parents of child sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim |
| Qualifications | <p>The facilitator must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault. The facilitator must also have training in group process and interpersonal dynamics, and experience as a facilitator or co-facilitator.</p> <p>The facilitator must be supervised by a paid staff person with a minimum of a BA degree in Human Services or a related field plus two years of relevant experience or a combination of six years of relevant experience, education and training. The facilitator must be, or receive consultation on group process from, a Masters level therapist.</p> |

THERAPY

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| Definition | A professional relationship within a theoretical framework that involves a specified helper gathering, systematizing and evaluating information and using techniques to address the effects of sexual abuse/assault. | |
| Goal | To identify, understand and ameliorate the effects of sexual abuse/assault; to promote healing and to integrate the sexual abuse/assault experience. | |
| Duration | 1 hour average length of time per session; 1 to 4 sessions per month; 3 months to several years; additional therapy could be indicated, depending on the individual case. | |
| Activities | Assessment: <ul style="list-style-type: none"> ■ Psychosocial history taking ■ Psychological testing, or psychiatric evaluation (including mental status exam) ■ In-person interviews with victims and/or family members ■ Collateral contacts, including review of relevant documents, telephone/in-person contact with other providers ■ Report writing | Therapy: <ul style="list-style-type: none"> ■ Individual, group or family therapy, based on current clinical therapeutic principles generally accepted as being appropriate to sexual abuse/assault ■ In-person visits in the office, on location or by phone ■ Family therapy can include a <u>treated</u> sexual offender in the course of reunification ■ Interpretation of findings and expert testimony ■ Consultation to other disciplines/systems |
| Service Recipients | <ul style="list-style-type: none"> ■ Child sexual abuse/assault victims ■ Adult or adolescent sexual abuse/assault victims with acute or past history of sexual abuse/assault ■ Non-offending parents whose children are sexual abuse/assault victims ■ Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim | |
| Qualifications | <p>Practitioners must complete 23 hours of initial sexual abuse/assault training, plus 6 hours of ongoing sexual abuse/assault training annually. All trainings must be consistent with the OCVA therapist-training standard. The practitioner must be knowledgeable about the principles of sound therapeutic practices with victims of sexual abuse/assault, including working with the continuum of sexual abuse/assault services and must understand victimization and demonstrate practices sensitive to sexual abuse/assault issues in therapy.</p> <p>Practitioners must be licensed psychiatrists or psychologists or be registered or certified professionals in the State of Washington and have a minimum of a master's degree in one or more the following: mental health counseling, marriage and family therapy, social work or related field. Practitioners who are completing an internship for a master's degree in any of the fields listed above and have completed the 23 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. Interns must also complete 6 hours of ongoing sexual abuse/assault training annually. For practitioners conducting assessments of children, refer to the guidelines from the American Professional Society on the Abuse of Children.</p> <p>Therapists, as well as individuals conducting assessments, must have regular supervision, consultation and/or review of cases, preferably by a Washington State licensed psychiatrist, psychologist or certified therapist.</p> | |

SOCIAL WORK FOR MEDICAL EVALUATIONS OF CHILDREN & VULNERABLE ADULTS

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| Definition | Preparing victim for medical evaluation; preparing and passing on a complete case history for purposes of contributing to investigation. |
| Goal | To complete the medical evaluation in a manner that minimizes the traumatization of the victim and caregivers. |
| Duration | Generally one hour by phone for intake with parent/caretaker; brief calls between intake and evaluation to prepare a victim for and reduce her/his anxiety about the evaluation and investigation; one hour in-person during evaluation; and subsequent contacts, usually by phone, as needed. |
| Activities | <p>Psychosocial history-taking, including assessment of parental protectiveness and parental coping, documentation of family structure, family dynamics, and dynamics of abuse/assault as related by parent/caretaker.</p> <ul style="list-style-type: none"> ■ Interpretation of stages of child physical and psychosexual development, signs of stress and of child sexual assault ■ Interpretation of medical evaluation process, indications for doing lab work, and meaning of possible physical findings ■ Interpretation of law enforcement investigation process and parent/caretaker role in same, including compliance with mandated reporting ■ Interpretation of child protective services functions and parent/caretaker role in same, including compliance with mandated reporting ■ Referral to appropriate CSAP for advocacy ■ Referral to therapy resources, including explanation of and assistance with Crime Victims Compensation application ■ When appropriate, communicate directly with child or adolescent victim to allay anxiety about medical evaluation ■ Crisis counseling for the purposes of preparing victim for the medical evaluation and to pass on a complete case history for purposes of investigation |
| Service Recipients | <ul style="list-style-type: none"> ■ Non-offending parent/caretakers of child and adolescent victims of sexual abuse/assault ■ Child and adolescent victims ■ Vulnerable adult victims and their caretakers or care managers |
| Qualifications | Master's degree in social work or related field or licensure as a Registered Nurse, Nurse Practitioner, Medical Doctor or Physician's Assistant. Employed by or contracted with a licensed medical institution or provider. Twelve hours of initial sexual assault/abuse training, plus twelve hours per year ongoing training. Practitioners who are completing an internship for any of the fields listed above and have completed the 12 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. |

**Washington State
Department of Commerce
Office of Crime Victims Advocacy**

State of Washington Sexual Assault Services Standards

Services for Marginalized And Native American Communities

Community Organizing, Training and Education

Community Responding

Primary Prevention

Therapy

COMMUNITY ORGANIZING, TRAINING AND EDUCATION

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| Definition | Provide culturally and linguistically appropriate information and conduct activities to increase knowledge about sexual violence, its root causes, and promote access to services for victims and survivors in marginalized and Native American communities. | | | |
| Goal | To increase the community’s awareness of sexual violence and ensure access to services for victims of sexual violence. | | | |
| Activities | <ul style="list-style-type: none">■ Sexual assault training and consultation to other professionals and institutions (e.g., law enforcement, mental health, and community sexual assault programs) on appropriate sexual assault service delivery, available services and ensure access to services for victims of sexual abuse/assault■ Community events and outreach focused on raising awareness of sexual violence, its root causes, and available services for the community■ Public speaking/presentations within the community focused on raising awareness of sexual violence, its root causes, and available services for the community■ Educational groups for adults or adolescents, facilitated/led by an advocate. The group must have an agenda with a primary focus on sexual abuse/assault issues. These issues can be presented in cycles so that membership may begin at any point in the cycle (<i>If the focus of the group is on prevention of sexual violence, the group is considered a primary prevention activity</i>)■ Distribution of sexual assault materials focused on raising awareness of sexual violence, its root causes, and available services for the community | | | |
| Recipients | Community individuals and groups, service providers, schools, and faith communities. | | | |
| Qualifications | <div>Services should be provided by community-based non-profit organizations, with a primary mission and history of serving a marginalized community¹, Tribes or tribal organizations².</div> <table><tr><td><u>Direct Service Provider</u> Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA approved culturally and/or linguistically appropriate initial sexual assault training. Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</td><td><u>Supervisor</u> Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA approved culturally and/or linguistically appropriate initial sexual assault training. Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually. Education/Experience: Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment, OR Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support. Other direct human service experience will be considered on a case-by-case basis.</td></tr></table> | | <u>Direct Service Provider</u> Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA approved culturally and/or linguistically appropriate initial sexual assault training. Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually. | <u>Supervisor</u> Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA approved culturally and/or linguistically appropriate initial sexual assault training. Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually. Education/Experience: Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment, OR Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support. Other direct human service experience will be considered on a case-by-case basis. |
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March, 2011

¹ Marginalized communities include, but are not limited to: lesbian, gay, bisexual, transgender and queer communities; individuals with disabilities; ethnic and racial communities; and Native American communities.

² Tribal organizations are non-profit organizations administered by Native Americans and whose primary mission is to serve Native Americans.

| COMMUNITY RESPONDING | | | | | | |
|--|---|--|--------------------------------|-------------------|--|---|
| Definition | Culturally and linguistically appropriate personal support and/or assistance in accessing services and addressing sexual abuse/assault related issues for victims in marginalized and Native American communities. | | | | | |
| Goal | To ensure access to services and support that enhances recovery from sexual abuse/assault. | | | | | |
| Activities | <p>Consulting with others (such as Child Protection Services, Adult Protection Services, Indian Child Welfare, Law Enforcement, etc.) regarding an individual case.</p> <p>Culturally and linguistically appropriate advocacy to victims and survivors provided by phone or face-to-face:</p> <ul style="list-style-type: none">• Support and assistance that may include the use of culturally specific healing methods• Information about and support with accessing services, medical care and resources• Information about and support with the criminal or civil justice systems (including tribal court)• Peer Support Groups for adults or adolescents, facilitated/led by an advocate. The group must have a planned beginning and ending date and an outcome-based structured agenda with a primary focus on sexual abuse/assault issues | | | | | |
| Recipients | <ul style="list-style-type: none">• Adult, adolescent or child victims of sexual abuse/assault• Non-offending parents or caregivers of child sexual abuse/assault victims• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim | | | | | |
| Qualifications | <p>Services should be provided by community-based non-profit organizations, with a primary mission and history of serving a marginalized community¹, Tribes or tribal organizations².</p> <table><tr><th><u>Direct Service Provider</u></th><th><u>Supervisor</u></th></tr><tr><td><p>Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA culturally and/or linguistically appropriate initial sexual assault training.</p><p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p></td><td><p>Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA culturally and/or linguistically appropriate initial sexual assault training.</p><p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p><p>Education/Experience: Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment, OR Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support.</p><p>Other direct human service experience will be considered on a case-by-case basis.</p></td></tr></table> | | <u>Direct Service Provider</u> | <u>Supervisor</u> | <p>Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA culturally and/or linguistically appropriate initial sexual assault training.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> | <p>Initial Training: 15 hours OCVA approved initial sexual assault training. 15 hours OCVA culturally and/or linguistically appropriate initial sexual assault training.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> <p>Education/Experience: Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment, OR Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support.</p> <p>Other direct human service experience will be considered on a case-by-case basis.</p> |
| <u>Direct Service Provider</u> | <u>Supervisor</u> | | | | | |
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March, 2011

¹ Marginalized communities include, but are not limited to: lesbian, gay, bisexual, transgender and queer communities; individuals with disabilities; ethnic and racial communities; and Native American communities.

² Tribal organizations are non-profit organizations administered by Native Americans and whose primary mission is to serve Native Americans.

| PRIMARY PREVENTION | |
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| Definition | Comprehensive activities that promote attitudes, behaviors, and social conditions aimed at preventing sexual violence before it happens. Primary prevention programming must be culturally and linguistically appropriate specific to the identified community. |
| Goal | To prevent sexual violence in communities and increase the willingness of communities to prevent sexual violence. |
| Activities | <p>Activities will vary from community to community and population to population. Appropriate activities are those aimed at preventing sexual violence before it occurs. Examples Include:</p> <ul style="list-style-type: none"> • A program or set of multi-session skill-building activities informed by community or cultural norms • A multisession set of activities on a topic logically connected with prevention (such as communication, parenting, trust, gender, boundaries, respect, building assets, social norms) • Prevention activities aimed at two or more of the four different levels of influence: individual, relationship, community, and society. This might combine education (individual) with policy examination (community) or media work (society) with peer education (relationship)¹ • Community development or other community-led processes and activities that are logically connected to preventing sexual violence and shifting ownership of prevention from the organization leading the initiative to the community. <p>The community development process is inclusive of:</p> <ol style="list-style-type: none"> 1. Establishing relationships within communities, ensuring the inclusion of marginalized and underserved communities 2. Recruiting stakeholders from a chosen community 3. Asking: Why does sexual violence happen here? (A) 4. Asking: What would it be like without sexual violence? (B) 5. Developing a plan to get from A to B 6. Asking: how will we know we are accomplishing anything? 7. Carrying out the plan 8. Evaluation and revision |
| Participants | <p>Individuals, a group of stakeholders or other groups within the identified community² such as:</p> <ul style="list-style-type: none"> ■ Youth ■ Parents/Caregivers ■ Community Members ■ Service Providers |

¹ Levels of influence from the Social Ecological Model of Prevention, (National Center for Injury Prevention and Control, Centers for Disease Control and Prevention).

² A community is any definable group of people who share concerns or interests

| | | |
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| Qualifications | <p>Services must be provided by a community sexual assault program (CSAP) or a community-based non-profit organization, with a primary mission and history of serving a marginalized community³, Tribe or tribal organization⁴.</p> | |
| | <p><u>Direct Service Provider</u></p> <p>Initial Training: 30 hours OCVA or WCSAP approved initial sexual assault training.</p> <p>5-hour WCSAP prevention orientation.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> | <p><u>Supervisor</u></p> <p>Initial Training: 30 hours OCVA or WCSAP approved initial sexual assault training.</p> <p>5-hour WCSAP prevention orientation.</p> <p>Annual Training: 12 hours WCSAP approved ongoing sexual assault training annually.</p> <p>Education/Experience:</p> <p>CSAP: two years of experience in sexual assault or domestic violence services.</p> <p>Marginalized community-based organization, Tribe, or tribal organization: two years of experience in culturally and linguistically appropriate sexual assault or domestic violence services.</p> <p>Other direct human service experience will be considered on a case-by-case basis.</p> |

March, 2015

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THERAPY

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| Goal | To identify, understand and ameliorate the effects of sexual abuse/assault; to promote healing and to integrate the sexual abuse/assault experience. | |
| Duration | 1 hour average length of time per session; 1 to 4 sessions per month; 3 months to several years; additional therapy could be indicated, depending on the individual case. | |
| Activities | <ul style="list-style-type: none"> ■ Assessment: Psychological testing, or psychiatric evaluation (including mental status exam) ■ In-person interviews with victims and/or family members ■ Collateral contacts, including review of relevant documents, telephone/in-person contact with other providers ■ Report writing | Therapy: <ul style="list-style-type: none"> ■ Individual, group or family therapy, based on current clinical therapeutic principles generally accepted as being appropriate to sexual abuse/assault ■ In-person visits in the office, on location or by phone ■ Family therapy can include a <u>treated</u> sexual offender in the course of reunification ■ Interpretation of findings and expert testimony ■ Consultation to other disciplines/systems |
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| Qualifications | <p>Practitioners must complete 23 hours of initial sexual abuse/assault training, plus 6 hours of ongoing sexual abuse/assault training annually. All trainings must be consistent with the OCVA therapist-training standard. The practitioner must be knowledgeable about the principles of sound therapeutic practices with victims of sexual abuse/assault, including working with the continuum of sexual abuse/assault services and must understand victimization and demonstrate practices sensitive to sexual abuse/assault issues in therapy.</p> <p>Practitioners must be licensed psychiatrists or psychologists or be registered or certified professionals in the State of Washington and have a minimum of a master's degree in one or more the following: mental health counseling, marriage and family therapy, social work or related field. Practitioners who are completing an internship for a master's degree in any of the fields listed above and have completed the 23 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. Interns must also complete 6 hours of ongoing sexual abuse/assault training annually. For practitioners conducting assessments of children, refer to the guidelines from the American Professional Society on the Abuse of Children.</p> <p>Therapists, as well as individuals conducting assessments, must have regular supervision, consultation and/or review of cases, preferably by a Washington State licensed psychiatrist, psychologist or certified therapist.</p> | |